

ALIMONY INCOME DECLARATION

RECIPIENT INFORMATION (DECLARANT)

FULL NAME

SOCIAL SECURITY NUMBER / TAX ID

ADDRESS

PHONE NUMBER

EMAIL ADDRESS

PAYER INFORMATION

FULL NAME

RELATIONSHIP (PRIOR TO DISSOLUTION)

ALIMONY AGREEMENT DETAILS

DIVORCE DECREE / SEPARATION AGREEMENT DATE

COURT JURISDICTION & CASE NUMBER

ALIMONY PAYMENT AMOUNT (\$)

PAYMENT FREQUENCY (E.G., MONTHLY, WEEKLY)

DATE PAYMENTS COMMENCED

TERMINATION DATE OF ALIMONY (IF APPLICABLE)

DECLARATION & SIGNATURE

I, the undersigned, hereby declare and affirm under penalty of perjury that the alimony income information provided above is true, accurate, and complete. I confirm that I receive the specified alimony payments in accordance with the legal agreements or court orders referenced herein.

SIGNATURE OF DECLARANT

DATE

NOTARY PUBLIC ACKNOWLEDGEMENT

State of _____ County of _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20____, by _____, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES